PART B - FEE(S) TRANSMITTAL

JUN 1 5 2006	mn should be used for tran respondence including the below or directed otherwise is.		or	<u>Fax</u>	Commissioner fo P.O. Box 1450 Alexandria, Virg (571)-273-2885	r Patents	hould be completed where correspondence address as arate "FEE ADDRESS" for	
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26574 7590 03/15/2006 SCHIFF HARDIN, LLP PATENT DEPARTMENT 6600 SEARS TOWER CHICAGO, IL 60606-6473					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
06/16/2006 HDESTA2 00000041 10049466					Melvin A. Robinson		(Depositor's name)	
00,70,2000 NDESTRE 0		lof election		Car Breno	(Signature)			
01 FC:2501 700.00 OP			Jane 9,			2006	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVENT			TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/049,466 02/12/2002 Ernst-Rudolf Gottfried Weidlich P02,0000 4109 FITLE OF INVENTION: METHOD FOR ENGRAVING PRINTING CYLINDERS								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE P		PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	Yes \$70			0.00 \$0		\$700.00	06/15/2006	
EXAMINER ART UN ROGERS, SCOTT A 2627			T CLASS-SUBCLASS 358-003290					
Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Hell Gravure Systems GmbH Kiel, GERMANY Please check the appropriate assignee category or categories (will not be printed on the patent):								
a. The following fee(s) are enclosed: Issue Fee Publication Fee (No small entity discount permitted)				Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
a. Applicant claims SI	(from status indicated above MALL ENTITY status. See is requested to apply the Issu ublication Fee (if required) v ords of the United States Pate	37 CFR 1.27.				LL ENTITY status. See 37 C y paid issue fee to the applica stered attorney or agent; or the		
Authorized Signature June 9, 2006								
Typed or printed name	Melvin A.	Robinson			Registration N	lo31,870		

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